

08 C 531

ILLINOIS TRAFFIC CRASH REPORT

PDF-30 (3-000/001)-1000000



8853537

INVESTIGATING AGENCY ILLINOIS STATE POLICE		TYPE OF REPORT 1 On-scene		TYPE OF CRASH B Injury		AGENCY CRASH REPORT NO. 15-07-05001		DATE OF CRASH 06/17/2007		TIME OF CRASH 10:40 AM	
ADDRESS NO. N/A		HIGHWAY OR STREET NAME NORTHWEST TOLLWAY(190) EB		CITY / TOWNSHIP SCHAUMBURG TWP		INTERSECTION N		NO. VEHICLES 2		LARS CODE Y	
DISTANCE 0.5		Miles East		COUNTY COOK		DAMAGED AREAS(S) NONE		TOWED Y		LARS CODE Y	
NAME (LAST, FIRST, MI) WILLIAMS III DEODIS NONE		DATE OF BIRTH 10/17/1969		MAKE Mercury		MODEL Mountain		YEAR 2002		TOWED Y	
STREET ADDRESS 1305 YORK DR		SEX M		SAFETY 2		AIR 9		VIN GETGOD		STATE IL	
CITY CARPENTERSVILLE		STATE IL		ZIP 60110		VEHICLE OWNER (LAST, FIRST, MI) WILLIAMS, SHIRELLE M		OWNER ADDRESS (STREET, CITY, STATE, ZIP) 1305 YORK DR, CARPENTERSVILLE, IL, 60110		PORT OF 1ST CONTACT 3	
TELEPHONE (847) 428-4281		LICENSE NO. W452-1606-9296		CLASS D*		INSURANCE AGENCY St. Alexis Medical Center		INSURANCE CO. None		INSURANCE POLICY NO. N/A	
TAKEN TO St. Alexis Medical Center		DRIVER Driver		DRIVER Driver		DRIVER Driver		DRIVER Driver		DRIVER Driver	
NAME (LAST, FIRST, MI) SHOWERS, CORRY MICHAEL		DATE OF BIRTH 11/11/1978		MAKE Kenworth		MODEL Met Truck		YEAR 2003		TOWED Y	
STREET ADDRESS 9728 GREEN LAKE TRAIL		SEX M		SAFETY 2		AIR 9		VIN PAH7237		STATE MIN	
CITY CHICAGO CITY		STATE MIN		ZIP 55003		VEHICLE OWNER (LAST, FIRST, MI) SHOWERS, L.L.C. AMERICAN LOGISTICS		OWNER ADDRESS (STREET, CITY, STATE, ZIP) 7900 97TH STREET SOUTH, COFFAGE GROVE, MN, 55016		PORT OF 1ST CONTACT 8	
TELEPHONE (600) 088-0080		LICENSE NO. PA36072080913		CLASS A		INSURANCE AGENCY St. Alexis Medical Center		INSURANCE CO. Great West Casualty Company		INSURANCE POLICY NO. 0000 0000-0000 CLP97875G	
TAKEN TO St. Alexis Medical Center		DRIVER Driver		DRIVER Driver		DRIVER Driver		DRIVER Driver		DRIVER Driver	
UNIT 1		SEAT 3		DOB 04/04/1971		SEX F		SAFT 2		AIR 9	
INJ B		EJECT 1		PROPERTY OWNER NAME WILLIAMS SHIRELLE M, 1305 YORK DRIVE, CARPENTERSVILLE, IL, 60110		PROPERTY OWNER ADDRESS (STREET, CITY, STATE, ZIP) 1305 YORK DRIVE, CARPENTERSVILLE, IL, 60110		PROPERTY OWNER NAME WILLIAMS SHIRELLE M, 1305 YORK DRIVE, CARPENTERSVILLE, IL, 60110		PROPERTY OWNER ADDRESS (STREET, CITY, STATE, ZIP) 1305 YORK DRIVE, CARPENTERSVILLE, IL, 60110	
LOC 2		LOC 2		ARREST NAME WILLIAMS III DEODIS NONE		ARREST NAME WILLIAMS III DEODIS NONE		ARREST NAME WILLIAMS III DEODIS NONE		ARREST NAME WILLIAMS III DEODIS NONE	
LOC 1		LOC 1		OFFICER ID 3875		BEAT / DIST 15		SUPERVISOR ID 15		SUPERVISOR ID 15	
LOC 3		LOC 3		CONTRIBUTORY CAUSE (primary) 3 Following too closely		CONTRIBUTORY CAUSE (secondary) 99 Not applicable		CONTRIBUTORY CAUSE (tertiary) 99 Not applicable		CONTRIBUTORY CAUSE (quaternary) 99 Not applicable	
LOC 1		LOC 1		DATE NOTIFIED 06/17/2007		COURT DATE 07/06/2007		COURT TIME 01:30 PM		COURT TIME 01:30 PM	
LOC 2		LOC 2		CITATION NO. 15-4701706		CITATION NO. 15-4701707		CITATION NO. 15-4701707		CITATION NO. 15-4701707	
LOC 3		LOC 3		SECTION Following too closely		SECTION Following too closely		SECTION Following too closely		SECTION Following too closely	

EXHIBIT

tabbles

COMMERCIAL VEHICLE		Unit 1	
CARRIER NAME	ADDRESS		SOURCE SIDE OF TRUCK PAPERS DRIVER LOG BOOK
CITY	STATE	ZIP	
ID Number:	State Name		GVWR
USDOT	ICCMC		
OR State No.	Name		
HAZARDOUS MATERIALS	PLACARDED?		
IF YES: 4 DIGITS	1 DIGIT		
HAZARDOUS CARGO RELEASED FROM TRUCK?	Name		
VIOLETION OF HAZMAT REGS. CONTRIBUTE TO CRASH?			
VIOLETION OF MCS REGS CONTRIBUTE TO CRASH?			
INSPECTION FROM COMPLETED?			
HAZMAT	OUT OF SERVICE?		FORM NO.
MCS	OUT OF SERVICE?		
IDOT PERMIT#	WideLoad		
TRAILER WIDTH(S)	TRAILER LENGTH(S)		Vehicle Length
TRAILER 1	TRAILER 1		Total - Ft
TRAILER 2	TRAILER 2		No Of Axles
Vehicle Configuration	Cargo Body Type		Load Type
COMMERCIAL VEHICLE			
CARRIER NAME	ADDRESS		SOURCE SIDE OF TRUCK PAPERS DRIVER LOG BOOK
CITY	STATE	ZIP	
ID Number:	State Name		GVWR
USDOT	ICCMC		
OR State No.	Name		
HAZARDOUS MATERIALS	PLACARDED?		
IF YES: 4 DIGITS	1 DIGIT		
HAZARDOUS CARGO RELEASED FROM TRUCK?			
VIOLETION OF HAZMAT REGS. CONTRIBUTE TO CRASH?			
VIOLETION OF MCS REGS CONTRIBUTE TO CRASH?			
INSPECTION FROM COMPLETED?			
HAZMAT	OUT OF SERVICE?		FORM NO.
MCS	OUT OF SERVICE?		
IDOT PERMIT#	WideLoad		
TRAILER WIDTH(S)	TRAILER LENGTH(S)		Vehicle Length
TRAILER 1	TRAILER 1		Total - Ft
TRAILER 2	TRAILER 2		No Of Axles
Vehicle Configuration	Cargo Body Type		Load Type

NARRATIVE (Refer to vehicle by Unit No.)

UNIT #2 WAS EASTBOUND ON I90, TRAVELING IN THE CENTER LANE, HE SAID UNIT #1 WAS TRAVELING AHEAD OF HIM WHEN UNIT #1 SUDDENLY LOST CONTROL. UNIT #1 SKIDDED ONTO THE INSIDE SHOULDER THE BACK OUT INTO THE LANES, UNIT #2 WAS UNABLE TO AVOID UNIT #1 AND STRUCK UNIT #2. UNIT #1 STATED HE WAS EASTBOUND ON I90, TRAVELING IN THE LEFT LANE, HE SAID TRAFFIC AHEAD OF HIM SUDDENLY STARTED STOPPING (BECAUSE OF AN EARLIER ACCIDENT WESTBOUND AT THAT LOCATION) UNIT #1 WAS UNABLE TO STOP IN TIME AND SWERVED ONTO THE INSIDE SHOULDER TO AVOID HITTING THE VEHICLE IN FRONT OF HIM. UNIT #1 LOST CONTROL AND THE SKIDDED BACK OUT INTO THE LANES AND WAS STRUCK BY UNIT #2. THIS CAUSED UNIT #1 TO ROLL OVER AND COME TO A REST ON THE INSIDE SHOULDER UP AGAINST THE MEDIAN WALL.

LOCAL USE ONLY Nothing

U1 Towed By / To: Hillside Towing / Hillside Towing

U1 Color: Red

U2 Towed By / To: /

U2 Color: Red